

County: Beaufort

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
BEAUFORT MEMORIAL HOSPITAL 955 RIBAUT RD BEAUFORT, SC 29902-5454 FAC.#:843-522-5200 TOOMEY, RICHARD K PH#: 843-522-5200 Facility Email: DCRAWFORD@BMHSC.ORG	Beaufort / County 955 RIBAUT RD BEAUFORT, SC 29902-5454 BEAUFORT COUNTY MEMORIAL HOSPITAL HTL-0026 / 11/30/2016	197
Licensed Beds: General: 169 Psychiatric: 14 Rehab: 14 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 5		

Certifications: Trauma Center Level III, Perinatal Level II, JCAHO Accredited

HILTON HEAD HOSPITAL 25 HOSPITAL CENTER BLVD HILTON HEAD ISLAND, SC 29926-2738 FAC.#:843-689-8206 CLARK, JEREMY PH#: Facility Email: HHH-CEO@TENETHEALTH.COM	Beaufort / Limited Liability Limited Partnership <del>25 HOSPITAL CENTER BLVD</del> HILTON HEAD ISLAND, SC 29926-2738 HILTON HEAD HEALTH SYSTEM LP HTL-0646 / 10/31/2015	93
Licensed Beds: General: 93 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: 2 Number Licensed Units: 290

Number of Activities/Facilities licensed in county of Beaufort # Lics: 2  
Number Licensed Units : 290

## Division of Health Licensing

County: Charleston

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>BON SECOURS-ST FRANCIS XAVIER HOSPITAL</b> 2095 HENRY TECKLENBURG DR CHARLESTON, SC 29414-5734 FAC.#:843-402-1000 CARROLL, ALLEN P PH#: 843-402-1006 <b>Facility Email:</b> ALLEN.CARROLL@RSFH.COM	Charleston / Non-Profit Corporation 2095 HENRY TECKLENBURG DR CHARLESTON, SC 29414-5734 BON SECOURS-ST FRANCIS XAVIER HOSPITAL INC <b>HTL-0750 / 07/31/2016</b>	204
<b>Licensed Beds: General: 204 Psychiatric: 0 Rehab: 0 Substance Abuse: 0</b> <b>Other Beds : NICU: 0 Neonatal Special Care: 11</b>		
<b>Certifications:Trauma Center Level III, Perinatal Level II, JCAHO Accredited</b>		
<b>CITADEL INFIRMARY</b> 171 MOULTRIE ST CHARLESTON, SC 29409-0001 FAC.#:843-953-6847 CAPELL, CAREY M PH#: 843-953-6847 <b>Facility Email:</b> CAREY.CAPELL@CITADEL.EDU	Charleston / State 171 MOULTRIE ST, THE CITADEL CHARLESTON, SC 29409-0001 BOARD OF VISITORS THE CITADEL <b>HTL-0035 / 05/31/2016</b>	38
<b>Licensed Beds: General: 38 Psychiatric: 0 Rehab: 0 Substance Abuse: 0</b> <b>Other Beds : NICU: 0 Neonatal Special Care: 0</b>		
<b>Certifications:None</b>		
<b>EAST COOPER MEDICAL CENTER</b> 2000 HOSPITAL DR MOUNT PLEASANT, SC 29464-3764 FAC.#:843-416-6210 ALEXANDER, JASON P PH#: 843-881-0100 <b>Facility Email:</b> JASON.ALEXANDER@TENETHEALTH.COM	Charleston / Corporation 2000 HOSPITAL DR MOUNT PLEASANT, SC 29464-3764 EAST COOPER COMMUNITY HOSPITAL INC <b>HTL-0447 / 03/16/2016</b>	130
<b>Licensed Beds: General: 130 Psychiatric: 0 Rehab: 0 Substance Abuse: 0</b> <b>Other Beds : NICU: 0 Neonatal Special Care: 10</b>		
<b>Certifications:Abortions, Trauma Center Level III, Perinatal Level II, JCAHO Accredited</b>		
<b>HEALTHSOUTH REHABILITATION HOSPITAL OF CHARLESTON</b> 9181 MEDCOM ST NORTH CHARLESTON, SC 29406-9184 FAC.#:843-820-7777 POWELL, TROY G PH#: 843-820-7777 <b>Facility Email:</b> TROY.POWELL@HEALTHSOUTH.COM	Charleston / Limited Liability Company (multiple member) HEALTHSOUTH REHABILITATION HOSPITAL OF CHARLESTON LLC <b>HTL-0648 / 12/31/2015</b>	49
<b>Licensed Beds: General: 0 Psychiatric: 0 Rehab: 49 Substance Abuse: 0</b> <b>Other Beds : NICU: 0 Neonatal Special Care: 0</b>		
<b>Certifications:JCAHO Accredited</b>		

County: Charleston

**Facility Type: Hospital or Institutional General Infirmary**

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>MOUNT PLEASANT HOSPITAL</b> 3500 N HWY 17 MOUNT PLEASANT, SC 29466-9123 FAC.#:843-724-2954 BUCK, TAVIA PH#: 843-606-7627 <b>Facility Email:</b> MELISSA.AMICK@RSFH.COM	Charleston / Non-Profit Corporation 3510 HWY 17 N STE 200 MOUNT PLEASANT, SC 29466-8229 ROPER ST FRANCIS MOUNT PLEASANT HOSPITAL <b>HTL-0909 / 10/31/2015</b>	85
<b>Licensed Beds: General: 85 Psychiatric: 0 Rehab: 0 Substance Abuse: 0</b> <b>Other Beds : NICU: 0 Neonatal Special Care: 0</b>		

**Certifications:Perinatal Level I, JCAHO Accredited**

<b>MUSC MEDICAL CENTER</b> 169 ASHLEY AVE CHARLESTON, SC 29425-8905 FAC.#:843-792-4000 YOUNG, KIMBERLY PH#: <b>Facility Email:</b> YOUKI@MUSC.EDU	Charleston / District 169 ASHLEY AVE CHARLESTON, SC 29425-8905 MEDICAL UNIVERSITY HOSPITAL AUTHORITY <b>HTL-0811 / 11/30/2015</b>	709
<b>Licensed Beds: General: 604 Psychiatric: 82 Rehab: 0 Substance Abuse: 23</b> <b>Other Beds : NICU: 16 Neonatal Special Care: 50</b>		

**Certifications:Abortions, Trauma Center Level I, Perinatal Level III Regional, JCAHO Accredited**

<b>PALMETTO LOWCOUNTRY BEHAVIORAL HEALTH</b> 2777 SPEISSEGGER DR NORTH CHARLESTON, SC 29405-8229 FAC.#:843-747-5830 BAKER, SHARI PH#: 843-747-5830 <b>Facility Email:</b> SHARI.BAKER@UHSINC.COM	Charleston / Limited Liability 2777 SPEISSEGGER DR NORTH CHARLESTON, SC 29405-8229 PALMETTO LOWCOUNTRY BEHAVIORAL HEALTH LLC <b>HTL-0729 / 08/31/2016</b>	108
<b>Licensed Beds: General: 0 Psychiatric: 92 Rehab: 0 Substance Abuse: 16</b> <b>Other Beds : NICU: 0 Neonatal Special Care: 0</b>		

**Certifications:JCAHO Accredited**

<b>ROPER HOSPITAL</b> 316 CALHOUN ST CHARLESTON, SC 29401-1125 FAC.#:843-724-2000 SEVERANCE, MATTHEW J PH#: 843-724-2901 <b>Facility Email:</b> DEE.MULLISON@RSFH.COM	Charleston / Non-Profit Corporation 316 CALHOUN ST CHARLESTON, SC 29401-1125 ROPER HOSPITAL INC <b>HTL-0063 / 10/31/2016</b>	368
<b>Licensed Beds: General: 316 Psychiatric: 0 Rehab: 52 Substance Abuse: 0</b> <b>Other Beds : NICU: 0 Neonatal Special Care: 0</b>		

**Certifications:Trauma Center Level III, JCAHO Accredited**

<b>SHERIFF AL CANNON DETENTION CENTER</b> 3841 LEEDS AVE N CHARLESTON, SC 29405-7469 FAC.#:843-529-7300 BEATY, WILLIS L PH#: <b>Facility Email:</b> LHICKS@CHARLESTONCOUNTY.ORG	Charleston / County 3841 LEEDS AVE NORTH CHARLESTON, SC 29405 CHARLESTON COUNTY SHERIFF'S OFFICE <b>HTL-0908 / 06/30/2016</b>	22
<b>Licensed Beds: General: 22 Psychiatric: 0 Rehab: 0 Substance Abuse: 0</b> <b>Other Beds : NICU: 0 Neonatal Special Care: 0</b>		

**Certifications:None**

County: Charleston

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
TRIDENT MEDICAL CENTER 9330 MEDICAL PLAZA DR N CHARLESTON, SC 29406-9104 FAC.#:843-847-4100 GALLATI, TODD PH#: 843-847-4100 Facility Email: TODD.GALLATI@HCAHEALTHCARE.COM	Charleston / Ltd. Liability 9330 MEDICAL PLAZA DR N CHARLESTON, SC 29406-9104 TRIDENT MEDICAL CENTER LLC HTL-0777 / 04/30/2016	313
Licensed Beds: General: 296 Psychiatric: 17 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 10		
Certifications: Abortions, Trauma Center Level III, Perinatal Level II, JCAHO Accredited		
VIBRA HOSPITAL OF CHARLESTON 1200 HOSPITAL DR MOUNT PLEASANT, SC 29464-3251 FAC.#:843-375-4000 ROCHE, JOSEPH PH#: Facility Email: JROCHE@VHCHARLESTON.COM	Charleston / Limited Liability 1200 HOSPITAL DR MOUNT PLEASANT, SC 29464-3251 VIBRA HOSPITAL OF CHARLESTON LLC HTL-0764 / 08/31/2016	59
Licensed Beds: General: 59 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications: JCAHO Accredited		

Totals For Facility/License Type: Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: 11 Number Licensed Units: 2,085

Number of Activities/Facilities licensed in county of Charleston # Lics: 11  
Number Licensed Units : 2,085

## Division of Health Licensing

County: Colleton

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

COLLETON MEDICAL CENTER	Colleton / Corporation	135
501 ROBERTSON BLVD	501 ROBERTSON BLVD	
WALTERBORO, SC 29488-5714 FAC.#:843-782-2000	WALTERBORO, SC 29488-5714	
GRIFFIN, BRADLEY M PH#: 843-782-2604	WALTERBORO COMMUNITY HOSPITAL INC	
Facility Email: MARILYN.FRYAR@HCAHEALTHCARE.COM	HTL-0405 / 03/31/2016	

Licensed Beds: General: 116 Psychiatric: 19 Rehab: 0 Substance Abuse: 0

Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: 1 Number Licensed Units: 135

Number of Activities/Facilities licensed in county of Colleton # Lics: 1  
 Number Licensed Units : 135

County: Dorchester

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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<b>LIEBER CORRECTIONAL INSTITUTION INFIRMARY</b>	Dorchester / State	10
136 WILBORN AVE	PO BOX 210382, SCDOC-ACCOUNTS PAYABLE	
RIDGEVILLE, SC 29472-6351 FAC. #: 803-896-3702	COLUMBIA, SC 29221-0382	
CONNELLY RN, STAR PH#:	SC DEPT OF CORRECTIONS	

Facility Email: ARDIS.JENNY@DOC.STATE.SC.US

HTL-0874 / 04/30/2016

Licensed Beds: General: 10 Psychiatric: 0 Rehab: 0 Substance Abuse: 0  
Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: None

<b>SUMMERVILLE MEDICAL CENTER</b>	Dorchester / Ltd. Liability	94
295 MIDLAND PKWY	295 MIDLAND PKWY	
SUMMERVILLE, SC 29485-8104 FAC. #: 843-832-5000	SUMMERVILLE, SC 29485-8104	
VALENTINE, LISA MARIE PH#: 000-000-0000	TRIDENT MEDICAL CENTER LLC	

Facility Email: LISA.VALENTINE1@HCAHEALTHCARE.COM

HTL-0780 / 04/30/2016

Licensed Beds: General: 94 Psychiatric: 0 Rehab: 0 Substance Abuse: 0  
Other Beds : NICU: 0 Neonatal Special Care: 4

Certifications: Abortions, Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: 2 Number Licensed Units: 104

Number of Activities/Facilities licensed in county of Dorchester # Lics: 2  
Number Licensed Units : 104

## Division of Health Licensing

County: Georgetown

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>TIDELANDS GEORGETOWN MEMORIAL HOSPITAL</b> 606 BLACK RIVER RD GEORGETOWN, SC 29440-3368 FAC.#:843-527-7200 MAXWELL, PAMELA PH#: 843-527-7200 <b>Facility Email:</b> PMAXWELL@TIDELANDSHEALTH.ORG	Georgetown / Non-Profit Corporation PO BOX 421718 GEORGETOWN, SC 29442-4203 TIDELANDS GEORGETOWN MEMORIAL HOSPITAL <b>HTL-0007 / 08/31/2015 (Renewal Pending)</b>	131
<b>Licensed Beds: General: 131    Psychiatric: 0    Rehab: 0    Substance Abuse: 0</b> <b>Other Beds :        NICU: 0    Neonatal Special Care: 5</b>		

Certifications: Perinatal Level II, JCAHO Accredited

<b>WACCAMAW COMMUNITY HOSPITAL</b> 4070 HWY 17 BYPASS MURRELLS INLET, SC 29576-5033 FAC.#:843-652-1001 RESETAR, GAYLE L PH#: 843-651-8211 <b>Facility Email:</b> GRESETAR@GEORGETOWNHOSPITALSYSTEM.ORG	Georgetown / Non-Profit Corporation 4070 HWY 17 BYPASS MURRELLS INLET, SC 29576-5033 WACCAMAW COMMUNITY HOSPITAL (INC) <b>HTL-0834 / 10/31/2015</b>	167
<b>Licensed Beds: General: 124    Psychiatric: 0    Rehab: 43    Substance Abuse: 0</b> <b>Other Beds :        NICU: 0    Neonatal Special Care: 2</b>		

Certifications: Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 2      Number Licensed Units: 298

Number of Activities/Facilities licensed in county of	<u>Georgetown</u>	# Lics: <u>2</u>
	Number Licensed Units :	<u>298</u>

## Division of Health Licensing

County: Horry

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>CONWAY HOSPITAL</b> 300 SINGLETON RIDGE RD CONWAY, SC 29526-9142 FAC. #: 843-347-7111 CLAYTON, PHILIP A PH#: 843-347-8114 <b>Facility Email:</b> PCLAYTON@CMC-SC.COM	Horry / Non-Profit Corporation PO BOX 829 CONWAY, SC 29528-0829 CONWAY HOSPITAL INC <b>HTL-0083 / 05/31/2016</b>	210
<b>Licensed Beds: General: 210    Psychiatric: 0    Rehab: 0    Substance Abuse: 0</b> <b>Other Beds :        NICU: 0    Neonatal Special Care: 6</b>		
<b>Certifications: Perinatal Level II</b>		
<b>GRAND STRAND MEDICAL CENTER</b> 809 82ND PKWY MYRTLE BEACH, SC 29572-4611 FAC. #: 843-692-1000 SIMS, MARK PH#: 000-000-0000 <b>Facility Email:</b> MARK.SIMS@HCAHEALTHCARE.COM	Horry / Ltd. Liability 809 82ND PKWY MYRTLE BEACH, SC 29572-4611 GRAND STRAND REGIONAL MEDICAL CENTER LLC <b>HTL-0770 / 04/30/2016</b>	301
<b>Licensed Beds: General: 301    Psychiatric: 0    Rehab: 0    Substance Abuse: 0</b> <b>Other Beds :        NICU: 0    Neonatal Special Care: 2</b>		
<b>Certifications: Trauma Center Level II, Perinatal Level II, JCAHO Accredited</b>		
<b>LIGHTHOUSE CARE CENTER OF CONWAY ACUTE CARE</b> 152 WACCAMAW MEDICAL PARK DR CONWAY, SC 29526-8901 FAC. #: 843-347-8871 RYBA, TOM PH#: 843-347-8871 <b>Facility Email:</b> TOM.RYBA@UHSINC.COM	Horry / Corporation 152 WACCAMAW MEDICAL PARK DR CONWAY, SC 29526-8901 HHC SOUTH CAROLINA INC <b>HTL-0898 / 01/31/2016</b>	78
<b>Licensed Beds: General: 0    Psychiatric: 60    Rehab: 0    Substance Abuse: 18</b> <b>Other Beds :        NICU: 0    Neonatal Special Care: 0</b>		
<b>Certifications: JCAHO Accredited</b>		
<b>MCLEOD LORIS</b> 3655 MITCHELL ST LORIS, SC 29569-2844 FAC. #: 843-716-7000 TINSLEY, EDWARD D PH#: 843-777-2855 <b>Facility Email:</b> DTINSLEY@MCLEODHEALTH.ORG	Horry / Non-Profit Corporation PO BOX 690001 LORIS, SC 29569-9601 LORIS LTC PROPERTIES LLC <b>HTL-0033 / 01/31/2016</b>	105
<b>Licensed Beds: General: 105    Psychiatric: 0    Rehab: 0    Substance Abuse: 0</b> <b>Other Beds :        NICU: 0    Neonatal Special Care: 0</b>		
<b>Certifications: Perinatal Level I, JCAHO Accredited</b>		
<b>MCLEOD SEACOAST</b> 4000 HWY 9 E LITTLE RIVER, SC 29566-7833 FAC. #: 843-390-8100 TINSLEY, EDWARD D PH#: 843-777-2855 <b>Facility Email:</b> DTINSLEY@MCLEODHEALTH.ORG	Horry / Non-Profit Corporation PO BOX 690001 LORIS, SC 29569-9601 LORIS LTC PROPERTIES LLC <b>HTL-0910 / 01/31/2016</b>	50
<b>Licensed Beds: General: 50    Psychiatric: 0    Rehab: 0    Substance Abuse: 0</b> <b>Other Beds :        NICU: 0    Neonatal Special Care: 0</b>		
<b>Certifications: Perinatal Level I, JCAHO Accredited</b>		



## Division of Health Licensing

County: Horry

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 5      Number Licensed Units: 744

Number of Activities/Facilities licensed in county of	<u>Horry</u>	# Lics: <u>5</u>
	Number Licensed Units :	<u>744</u>

County: Jasper

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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COASTAL CAROLINA HOSPITAL	Jasper / Corporation	41
1000 MEDICAL CENTER DR	1445 ROSS AVE STE 1400	
HARDEEVILLE, SC 29927-3446 FAC.#:843-784-8000	DALLAS, TX 75202-2703	
TALBERT, BRADLEY S PH#: 843-876-8340	COASTAL CAROLINA MEDICAL CENTER INC	
Facility Email: JANE.BENNETT@TENETHEALTH.COM	HTL-0902 / 06/30/2016	

Licensed Beds: General: 41 Psychiatric: 0 Rehab: 0 Substance Abuse: 0  
Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: 1 Number Licensed Units: 41

Number of Activities/Facilities licensed in county of Jasper # Lics: 1  
Number Licensed Units : 41

Report Totals

Total Number of Activities/Facilities licensed 24 Total Number Licensed Units: 3,697